Quick Steps to Fruits & Vegetables Galore & Dairy Too

School Data Form

Numbers Should be Reported by Individual School; Not by District PLEASE PRINT OR TYPE ALL INFORMATION REQUESTED

Fax To: 609-984-0878 Attn: Janet Renk

School District:	County:
District Food Service Director:	District Director's Phone #:
School Food Service Fax #: ()	School Food Service E-Mail:
Name of School:	School Grade Levels:
Address:	
Food Service Manager/Lead Person:	Manager's/Lead's Phone #:
Meals Offered:	
☐ School Breakfast ☐ Natl. School Lunch ☐ After School Snack Program	
School's ADA (Average Daily Attendance) from October 2005 Voucher:	
From October 2005 Reimbursement Voucher, Meal Applications on File: FreeReduced	
Indicate Week You are Reporting Information: (Check one)	
☐ Oct. 3-7 ☐ Oct. 10-14	☐ Oct.17-21 ☐ Oct. 24-28
Number of Servings of Fruit Used for Week You are Reporting Information: (Report information from your food production records, "# of portions used" column. Include all fruit used for reimbursable lunch meals and a la carte.)	
# of servings of fruit for entire week	
Number of Servings of Vegetables Used During Reporting Week: (Report information from your food production records, "# of portions used" column. Include all vegetables used for reimbursable lunch meals and a la carte.)	
# of servings of vegetables for entire week	
Number of ½ pints of Milk Used for Week You are Reporting Information: (Report information from your milk order sheets. Include all milk used for reimbursable meals both breakfast and lunch, a la carte and vending)	
# of ½ pints low fat white (1% & 29	•
# of ½ pints whole white # of ½ pints low fat choc.	
# of ½ pints low fat strawberry # of other milk Indicate size:	Varioty
# of other milk Indicate size:	
# of other milk Indicate size:	_